

022604  
17236 U.S. PTOUTILITY  
PATENT APPLICATION  
TRANSMISSION

Our Docket No.: A-72076-5/AMP

First Named Inventor: Linda G. LEE

Title: ENERGY TRANSFER DYES WITH ENHANCED  
FLUORESCENCE

Express Mail No.: EV 182096164US

22390 10/788836 U.S. PTO  
022604

## ADDRESS TO:

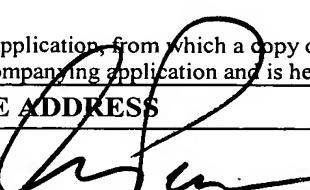
Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

APPLICATION ELEMENTS

|   |  |
|---|--|
| 1. <input checked="" type="checkbox"/> Fee Calculation Sheet<br>(Submit an original and a duplicate for fee processing)   | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)            |
| 2. <input type="checkbox"/> Applicant claims small entity status  | 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission<br>(If applicable, all necessary) |
| 3. <input checked="" type="checkbox"/> Specification Total Pages: 108   | a. <input type="checkbox"/> Computer Readable Form (CRF)   |
| <input checked="" type="checkbox"/> Descriptive title of the invention  | b. <input type="checkbox"/> Specification Sequence Listing on:   |
| <input checked="" type="checkbox"/> Cross References to Related Applications  | i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or  |
| <input type="checkbox"/> Statement Regarding Fed. Sponsored R&D   | ii. <input type="checkbox"/> Paper   |
| <input type="checkbox"/> Reference to Microfiche Appendix   | c. <input type="checkbox"/> Statement verifying identify of above copies                                       |
| <input checked="" type="checkbox"/> Background of the Invention   | 9. <input type="checkbox"/> Certification Under 35 U.S.C. 122(b)(2)(B)(i)                                      |
| <input checked="" type="checkbox"/> Brief Summary of the Invention  | 10. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))                                     |
| <input checked="" type="checkbox"/> Brief Description of the Drawings   | 11. <input type="checkbox"/> 37 C.F.R. 3.73(b) Submission  |
| <input checked="" type="checkbox"/> Detailed Description  | 12. <input type="checkbox"/> Revocation and Power of Attorney  |
| <input checked="" type="checkbox"/> Claims  | 13. <input type="checkbox"/> English Translation Document (if applicable)                                      |
| <input checked="" type="checkbox"/> Abstract of the Disclosure  | 14. <input type="checkbox"/> Information Disclosure Statement<br>(with Copies of Citations as necessary)       |
| 4. <input checked="" type="checkbox"/> Drawings (35 U.S.C. 113) Total Sheets: 16  | 15. <input type="checkbox"/> Preliminary Amendment Total Pages:  |
| 5. <input checked="" type="checkbox"/> Oath or Declaration Total Pages: 2   | 16. <input checked="" type="checkbox"/> Return Receipt Postcard<br>(Should be specifically itemized)           |
| <input type="checkbox"/> Newly Executed (original or copy)  | 17. <input type="checkbox"/> Certified Copy of Priority document(s)<br>(if foreign priority is claimed)        |
| a. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d)) (for continuation/ divisional with Box 19 completed)   | 18. <input checked="" type="checkbox"/> Other: Check   |
| b. 1. <input type="checkbox"/> <u>DELETION OF INVENTORS</u><br>Signed statement attached deleting inventor(s) named in the prior application (37 C.F.R. 1.63(d)(2) and 1.33(b))   |  |
| 6. <input type="checkbox"/> Application Data Sheet (37.C.F.R. 1.76)   |  |
| 19. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:<br><input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of prior Application Nos.: 10/014,743 filed October 29, 2001 |  |

For continuation or divisional applications: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference

CORRESPONDENCE ADDRESS

|           |   |   |               |
|-----------|---|---|---------------|
| ATTY NAME | Ann M. Caviani Pease<br>Reg. No. 42,067   | SIGNATURE:  | DATE: 2/26/04 |
| ADDRESS   | DORSEY & WHITNEY LLP<br>Four Embarcadero Center, Suite 3400<br>San Francisco, California 94111-4187 |   |               |
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| FAX       | (650) 494-8771  |   |               |

**APPLICATION  
FEE TRANSMITTAL SHEET  
(FY 2004)**

| Complete if Known    |  |  |                   |
|----------------------|--|--|-------------------|
| Application No.      |  |  |                   |
| Filing Date          |  |  | February 26, 2004 |
| First Named Inventor |  |  | Linda G. LEE      |
| Group Art Unit       |  |  |                   |
| Examiner Name        |  |  |                   |
| Atty. Docket Number  |  |  | A-72076-5/AMP     |

| METHOD OF PAYMENT (Check One)  |                  |  | FEE CALCULATION (Continued)   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
|--|------------------|--|---|--|--|------------------|------------------|-----------------|----------|----|----|--|--|-----|----|--|--|-----|-----|-------------------|--|----|----|--|--|-----|----|--|--|-----|-----|---|--|-----|-----|--|--|-------|-----|---|--|------|------|--|--|-----|-----|------------------------------|--|-----|-----|------------------|--|-----|-----|--|--|-----|-----|--------------------------|--|-----|----|-------------------------|--|-----|-----|-------------------------------|--|----|----|---|--|-------|-----|--|--|-----|-----|--|--|-----|-----|---|--|-----|-----|---|--|-----|-----|------------------------------------|--|-----|----|----------------------------------|--|-------|-----|------------------------------------|--|----------------------------------|--|--|----------------------|--|--|------------------|------------------|-----------------|--|--|--|----|---|------------------------|--|--|--|----|----|-----------------------------------|--|--|--|-----|-----|--------------------------|--|--|--|----|----|---|--|--|--|----|---|---|--|--|--|--|--|--|--------------|--|--|--|--|--|--------------------------|--|--|--|--|--|------------|--|--|
| <p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:<br/>Deposit Account No.: 50-2319<br/>Deposit Account Name: DORSEY &amp; WHITNEY LLP</p> <p><input checked="" type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17<br/><input type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27)</p> <p>2. <input checked="" type="checkbox"/> Check Enclosed</p> |                  |  | <p><b>3. ADDITIONAL FEES</b></p> <table border="1"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee</th> <th>Fee Description</th> <th>Fee paid</th> </tr> </thead> <tbody> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>65</td> <td>Surcharge - Late nonprovisional filing fee or oath</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of IDS</td> <td></td> </tr> <tr> <td>40</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>420</td> <td>210</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>950</td> <td>475</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1,480</td> <td>740</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>2010</td> <td>1005</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>770</td> <td>385</td> <td>Submission After Final 1.129</td> <td></td> </tr> <tr> <td>330</td> <td>165</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>330</td> <td>165</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>290</td> <td>145</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Terminal Disclaimer Fee</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>50</td> <td>50</td> <td>Petitions related to provisional applications</td> <td></td> </tr> <tr> <td>1,330</td> <td>665</td> <td>Utility/Reissue Issue Fee (including advance copies)</td> <td></td> </tr> <tr> <td>480</td> <td>240</td> <td>Design Issue Fee (inc. advance copies)</td> <td></td> </tr> <tr> <td>770</td> <td>385</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>300</td> <td>300</td> <td>Publication fee for early, voluntary, or normal publication</td> <td></td> </tr> <tr> <td>300</td> <td>300</td> <td>Publication fee for re-publication</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Petition to Revive - unavoidable</td> <td></td> </tr> <tr> <td>1,330</td> <td>665</td> <td>Petition to Revive - unintentional</td> <td></td> </tr> <tr> <td colspan="3">*Calculation of Extra Claim Fees</td><td colspan="3">OTHER FEE (specify):</td></tr> <tr> <td>Large Entity Fee</td><td>Small Entity Fee</td><td>Fee Description</td><td colspan="3"></td></tr> <tr> <td>18</td><td>9</td><td>Claims in excess of 20</td><td colspan="3"></td></tr> <tr> <td>86</td><td>43</td><td>Independent claims in excess of 3</td><td colspan="3"></td></tr> <tr> <td>290</td><td>145</td><td>Multiple dependent Claim</td><td colspan="3"></td></tr> <tr> <td>84</td><td>42</td><td>Reissue independent claims over original patent</td><td colspan="3"></td></tr> <tr> <td>18</td><td>9</td><td>Reissue claims in excess of 20 and over original patent</td><td colspan="3"></td></tr> <tr> <td colspan="3"></td><td colspan="3">Subtotal (3)</td></tr> <tr> <td colspan="3"></td><td colspan="3">Total Amount of Payment:</td></tr> <tr> <td colspan="3"></td><td colspan="3">\$1,140.00</td></tr> </tbody> </table> |  |  | Large Entity Fee | Small Entity Fee | Fee Description | Fee paid | 50 | 25 | Surcharge - late provisional filing fee or cover sheet |  | 130 | 65 | Surcharge - Late nonprovisional filing fee or oath |  | 180 | 180 | Submission of IDS |  | 40 | 40 | Recording each patent assignment per property (times number of properties) |  | 110 | 55 | Extension for reply within first month |  | 420 | 210 | Extension for reply within second month |  | 950 | 475 | Extension for reply within third month |  | 1,480 | 740 | Extension for reply within fourth month |  | 2010 | 1005 | Extension for reply within fifth month |  | 770 | 385 | Submission After Final 1.129 |  | 330 | 165 | Notice of Appeal |  | 330 | 165 | Filing a brief in support of an appeal |  | 290 | 145 | Request for oral hearing |  | 110 | 55 | Terminal Disclaimer Fee |  | 130 | 130 | Petitions to the Commissioner |  | 50 | 50 | Petitions related to provisional applications |  | 1,330 | 665 | Utility/Reissue Issue Fee (including advance copies) |  | 480 | 240 | Design Issue Fee (inc. advance copies) |  | 770 | 385 | Request for Continued Examination (RCE) |  | 300 | 300 | Publication fee for early, voluntary, or normal publication |  | 300 | 300 | Publication fee for re-publication |  | 110 | 55 | Petition to Revive - unavoidable |  | 1,330 | 665 | Petition to Revive - unintentional |  | *Calculation of Extra Claim Fees |  |  | OTHER FEE (specify): |  |  | Large Entity Fee | Small Entity Fee | Fee Description |  |  |  | 18 | 9 | Claims in excess of 20 |  |  |  | 86 | 43 | Independent claims in excess of 3 |  |  |  | 290 | 145 | Multiple dependent Claim |  |  |  | 84 | 42 | Reissue independent claims over original patent |  |  |  | 18 | 9 | Reissue claims in excess of 20 and over original patent |  |  |  |  |  |  | Subtotal (3) |  |  |  |  |  | Total Amount of Payment: |  |  |  |  |  | \$1,140.00 |  |  |
| Large Entity Fee   | Small Entity Fee | Fee Description  | Fee paid  |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 50   | 25               | Surcharge - late provisional filing fee or cover sheet                     |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 130  | 65               | Surcharge - Late nonprovisional filing fee or oath                         |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 180  | 180              | Submission of IDS  |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 40   | 40               | Recording each patent assignment per property (times number of properties) |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 110  | 55               | Extension for reply within first month                                     |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 420  | 210              | Extension for reply within second month                                    |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 950  | 475              | Extension for reply within third month                                     |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 1,480  | 740              | Extension for reply within fourth month                                    |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 2010   | 1005             | Extension for reply within fifth month                                     |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 770  | 385              | Submission After Final 1.129   |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 330  | 165              | Notice of Appeal   |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 330  | 165              | Filing a brief in support of an appeal                                     |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 290  | 145              | Request for oral hearing   |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 110  | 55               | Terminal Disclaimer Fee  |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 130  | 130              | Petitions to the Commissioner  |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 50   | 50               | Petitions related to provisional applications                              |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 1,330  | 665              | Utility/Reissue Issue Fee (including advance copies)                       |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 480  | 240              | Design Issue Fee (inc. advance copies)                                     |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 770  | 385              | Request for Continued Examination (RCE)                                    |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 300  | 300              | Publication fee for early, voluntary, or normal publication                |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 300  | 300              | Publication fee for re-publication   |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 110  | 55               | Petition to Revive - unavoidable   |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 1,330  | 665              | Petition to Revive - unintentional   |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| *Calculation of Extra Claim Fees   |                  |  | OTHER FEE (specify):  |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| Large Entity Fee   | Small Entity Fee | Fee Description  |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 18   | 9                | Claims in excess of 20   |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 86   | 43               | Independent claims in excess of 3  |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 290  | 145              | Multiple dependent Claim   |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 84   | 42               | Reissue independent claims over original patent                            |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
| 18   | 9                | Reissue claims in excess of 20 and over original patent                    |   |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
|  |                  |  | Subtotal (3)  |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
|  |                  |  | Total Amount of Payment:  |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |
|  |                  |  | \$1,140.00  |  |  |                  |                  |                 |          |    |    |  |  |     |    |  |  |     |     |                   |  |    |    |  |  |     |    |  |  |     |     |   |  |     |     |  |  |       |     |   |  |      |      |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |     |     |                          |  |     |    |                         |  |     |     |                               |  |    |    |   |  |       |     |  |  |     |     |  |  |     |     |   |  |     |     |   |  |     |     |                                    |  |     |    |                                  |  |       |     |                                    |  |                                  |  |  |                      |  |  |                  |                  |                 |  |  |  |    |   |                        |  |  |  |    |    |                                   |  |  |  |     |     |                          |  |  |  |    |    |   |  |  |  |    |   |   |  |  |  |  |  |  |              |  |  |  |  |  |                          |  |  |  |  |  |            |  |  |

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